



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Robert S. MIZEK
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Group No.: 3712

Serial No.: 10/771,086

Filing Date: 03 February 2004

Examiner:
John A. Ricci

Title: ARCHERY BOW VIBRATION DAMPENER

Customer No.: 42419

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed 08 July 2004, please amend the
subject patent application as follows:

Amendments to the claims are reflected in the listing of claims which
begins on page 2 of this paper.

I hereby certify that this correspondence (along with any paper referred to as being attached or enclosed) is being
deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for
Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

07 OCT. 2004

07 OCT. 2004

Date

Signature

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01/25/2005 ENIMHONS 00000001 193550 10771086

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WFB

Serial No.: 10/771,086

Applicants have amended Claim 1 and 10 to include the limitations of objected to, but allowable, Claims 2 and 12, respectively. Applicants urge that such amendment should result in the allowance of Claim 1-12.

CONCLUSION

In view of the above Amendment and remarks, Applicants sincerely believe that Claims 1-18 of this patent application are now in condition for allowance and early allowance is respectfully requested.

Respectfully submitted,



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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

16771686

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	17	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	17 minus 20 =	0
INDEPENDENT CLAIMS	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

10-12-05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	18	20	2
Independent	6	3	3
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

1-18-05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	17	20	3
Independent	5	6	6
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			
Independent			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
XS 9=	
X43=	
+145=	
TOTAL	385

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
XS 9=	
X43=	132
+145=	
TOTAL ADDIT. FEE	132

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL ADDIT. FEE	